



ROCHESTER

Minnesota

ETHICS ORDINANCE DISCLOSURE FORM



NAME: JOHN T. NICHOLSON
ADDRESS: 5623 SILAS DENT RD NW
CITY, STATE, ZIP CODE ROCHESTER, MN 55901

1. What is the name of your position, title or job title?

Member- Zoning Board of Appeals

2. Is this an employed, appointed, or elected position?

Appointed

3. What is the name of the City department in which you are employed, or City board, commission or elected body on which you serve?

Planning Department

4. When were you hired, appointed or elected to this position?

MAY 5, 2014

For questions 5, 6 and 7, the word "interest" means a substantial financial interest through your ownership of stocks, bonds, notes or other securities. The word "interest" also includes an interest arising from blood, marriage or other personal relationships or close business or political association. The phrase "doing business" means engaged in any contractual relationship with the City or making application for such relationship or for any relief or benefit available from the City including, but not limited to, variance, permit, license or plat approval.

(SEE REVERSE SIDE)

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Disclosure Form
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5. Please list your interests in real property within the City of Rochester, other than your homestead. Complete on a separate page if necessary.

None

6. Please list any interests you have in a business ~~doing~~ with the City.

None

Is based

7. Please list any interest you have in any business located within, or doing business in, the City.

None

8. List any and all employment.

Retired, not employed

I hereby certify that the above information is complete and accurate.

John T. Nickolson
Signature

PROX

May 8, 2014
Date